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MS Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA
22313-1450, on the date shown below.

Dated: January 6, 2005 Signature: Carol Martin
(Carol Martin)

2137
DRW

Docket No.: 34650-00665USPT
(PATENT)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of:
Bernard Smeets et al.

Application No.: 09/821533

Confirmation No.: 4727

Filed: March 29, 2001

Art Unit: 2137

For: METHOD AND APPARATUS FOR SECURE
LEVELED ACCESS CONTROL

Examiner: C. D. Fields

AMENDMENT IN RESPONSE TO NON-FINAL OFFICE ACTION

MS Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

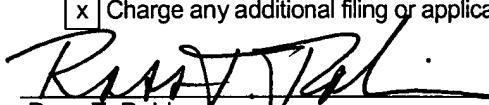
Dear Sir:

INTRODUCTORY COMMENTS

In response to the Office Action dated October 6, 2004 (Paper No. 09282004), please amend the above-identified U.S. patent application as follows:

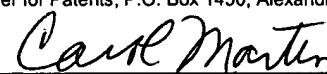
Remarks/Arguments begin on page 2 of this paper.



AMENDMENT TRANSMITTAL LETTER				Docket No. 34650-00665USPT
Application No. 09/821533-Conf. #4727	Filing Date March 29, 2001	Examiner C. D. Fields	Art Unit 2137	
Applicant(s): Bernard Smeets et al.				
Invention: METHOD AND APPARATUS FOR SECURE LEVELED ACCESS CONTROL				
TO THE COMMISSIONER FOR PATENTS				
Transmitted herewith is an amendment in the above-identified application.				
The fee has been calculated and is transmitted as shown below.				
CLAIMS AS AMENDED				
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate
Total Claims		- 20 =		x
Independent Claims		- 3 =		x
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>				
Other fee (please specify):				
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:				0.00
<input checked="" type="checkbox"/> Large Entity <input type="checkbox"/> Small Entity				
<input type="checkbox"/> No additional fee is required for this amendment.				
<input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of \$ _____. A duplicate copy of this sheet is enclosed.				
<input type="checkbox"/> A check in the amount of \$ _____ to cover the filing fee is enclosed.				
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.				
<input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. <u>10-0447</u> as described below. A duplicate copy of this sheet is enclosed.				
<input checked="" type="checkbox"/> Credit any overpayment.				
<input checked="" type="checkbox"/> Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.				
 Ross T. Robinson Attorney Reg. No.: 47,031				
Dated: <u>January 6, 2005</u>				
JENKENS & GILCHRIST, A PROFESSIONAL CORPORATION 1445 Ross Avenue, Suite 3200 Dallas, Texas 75202 (214) 965-7300				

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Dated: January 6, 2005

Signature:  (Carol Martin)